



1458
C.C.

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/719,206	
	Filing Date	November 21, 2003	
	First Named Inventor	Asatsuma, T. et al.	
	Group Art Unit	2811	
	Examiner Name	Hu, S.	
Total Number of Pages in This Submission		Attorney Docket Number	09794353-0031

ENCLOSURES (check all that apply)						
<input checked="" type="checkbox"/> Transmitted herewith is response to office action dated September 2, 2005 along with Information Disclosure Statement, 1449 and six (6) cited foreign patent references						
<input checked="" type="checkbox"/> The fee has been calculated as shown below:						
(1) FOR	(2) CLAIMS REMAINING AFTER AMENDMENT	(3)	(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	(6) RATE	(7) ADDITIONAL FEE
TOTAL CLAIMS	18	-	82		<input type="checkbox"/> x \$200.00 <input type="checkbox"/> x \$100.00	\$
INDEPENDENT CLAIMS	2	-	25		<input type="checkbox"/> x \$50.00 <input type="checkbox"/> x \$25.00	\$
APPLICATION AMENDED TO CONTAIN ANY MULTIPLE DEPENDENT CLAIMS NOT PREVIOUSLY PAID FOR.				<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input type="checkbox"/> x \$360.00 <input type="checkbox"/> x \$180.00 ONE TIME	\$
				TOTAL ADDITIONAL FEE FOR THIS AMENDMENT		\$
<input checked="" type="checkbox"/> Applicant petitions the Commissioner for Patents to extend the time for responding to the Office Action dated <u>July 26, 2005</u> by three month(s) for a fee of \$1020 so that the period for response is extended to <u>January 26, 2006</u> under 37 C.F.R. § 1.321.						
<input checked="" type="checkbox"/> Information Disclosure Statement, Form 1449 w/ one reference						
<input checked="" type="checkbox"/> The enclosed credit card payment form to charge the amount of \$ <u>1200.</u> covers the total claim fee and other applicable fees and filing of Information Disclosure Statement.						
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge the extension fee and any additional fees which may be required, or to credit any overpayment to Account No. 19-3140. A duplicate of this sheet is enclosed.						
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT						
14. <input checked="" type="checkbox"/> Customer No. 26263						
Dated: <u>January 25, 2006</u>				 Christopher P. Rauch (Registration No. <u>45,084</u>)		

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date indicated below.	
Dated: <u>January 25, 2006</u>	 Paula M. Theismann